

# Urban District of Dodworth.

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## REPORT.

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DODWORTH,

MARCH, 1914.

GENTLEMEN,

The number of Deaths in Dodworth in 1913 was 39. This includes 7 deaths in public institutions outside Dodworth. The rate per 1,000 population is 11·87. This is the most favourable year, as regards deaths, since 1899; probably the best on record, for we have now a larger population.

The birth rate per 1,000 population for England and Wales is 23·9, and the death rate for England and Wales is 13·7.

Deaths.			Births.		
1896	...	89			
1899	...	36			
1900	...	51	...	1900	...
1901	...	52	...	1901	...
1902	...	61	...	1902	...
1903	...	66	...	1903	...
1904	...	62	...	1904	...
1905	...	52	...	1905	...
1906	...	55	...	1906	...
1907	...	51	...	1907	...
1908	...	47	...	1908	...
1909	...	46	...	1909	...
1910	...	48	...	1910	...
1911	...	73	...	1911	...
1912	...	44	...	1912	...
1913	...	39	...	1913	...

		Deaths.	
		Males.	Females.
1904	...	34	28
1905	...	28	24
1906	...	31	24
1907	...	27	24
1908	...	36	11
1909	...	22	24
1910	...	34	14
1911	...	32	41
1912	...	23	21
1913	...	20	19
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		287	230

The chief causes of death in adults were—2 of Phthisis, 2 of Cancers, 6 of Heart Disease, 3 of Bronchitis, 1 of Appendicitis and 4 of Nephritis. Ten died at ages over 65.

There were 11 Deaths in infants under 1 year of age. A remarkable proportion of these (seven) were due to Premature Birth. We had very little Diarrhœa in children, though 2 deaths are given as due to Enteritis—one child 23 days old, and the other 1 day old. The remaining 2 died from Bronchitis. The rate of infantile deaths was 108 per 1,000 births.

### DAIRIES, COWSHEDS, AND MILK SHOPS

Have all been inspected, and have been found satisfactory.

#### Infectious Diseases.

	Sc. F	Diph.	Ent. F.	Erys.	Puerp. F.	Total.
1900	8	—	1	1	—	10
1901	6	—	5	6	1	21
1902	18	2	1	7	—	28
1903	9	6	5	2	2	24
1904	104	8	2	4	—	118
1905	28	34	3	4	—	69
1906	46	16	1	1	1	65
1907	6	2	—	1	—	9
1908	18	2	2	4	—	26
1909	9	2	6	1	—	18
1910	7	22	1	1	—	31
1911	62	17	2	4	—	85
1912	11	11	—	3	—	25
1913	32	6	—	—	—	38

Thirteen cases of Scarlet Fever were sent to the Hospital.

In November the Day Schools and Children's Night Schools and the Sunday Schools were closed on account of Scarlet Fever. The closing seemed to check the disease, for we had only a few cases after re-opening at end of a month.

Incidence of Scarlet Fever in Dodworth and some other places in 1913 :—

England and Wales	...	3·5	% of the population
Durham	...	6	„ „
Northumberland	...	6	„ „
Monmouth	...	8·8	„ „
Yorkshire—N. & W. Ridings,	3·8	„	„
„ E. Riding	...	1·5	„ „
Huntingdon	...	·8	„ „
Rutland	...	·9	„ „
Dodworth	- 8·1	...	Rawmarsh - 8·7
Featherstone	- 11·4	...	Shelley - ·5
Monk Bretton	- 4·5	...	Worsbro' - 9·8
Saddleworth	- 8·5	...	Holme - 39·0
Wombwell	- 3·2	...	Sheffield - 7·7
Emley	- 18·2	...	Darfield - 1·8
Birmingham	- 10·2	...	Hoyland Nether - 7·6
Cudworth	- 8·5	...	Royston - ·15
Greasbro'	- 9·9	...	Thurnscoe - ·7
Darton	- 6·5		

#### **TUBERCULOSIS.**

One case was reported.

#### **SLAUGHTER HOUSES.**

In good order, except one, which required re-paving.

## HOUSING.

Many houses were inspected, but no recommendations were considered necessary to be made. Three houses have been closed following our last inspection. No over-crowding has been detected. The average number of persons to each house is 4·8.

I am required by the Local Government Board to report yearly on the housing in Dodworth, as to inadequacy in number, fitness, or unfitness for habitation, &c. Fitness or unfitness depends on the standard we set up. I should say that a fourth of the houses in England are unfit for habitation. I know villages where three-fourths of the houses are unfit for habitation. I know houses in Dodworth that I should not like to live in. But we cannot pull down the one-fourth of the houses in England or the three-fourths of the houses in these unfortunate villages, unless we are prepared to put up an equal number; and we cannot pull down all the dark, low ceilinged, stone-flagged, or even damp houses in Dodworth, for a considerable portion would have to go. Most of our Dodworth houses were built very long ago, before the housing question had attained its present prominence. In previous years I have reported a shortage of houses in Dodworth for the men who work in the district. To build 50 or 100 houses would scarcely appreciably alleviate the situation. The Council do not



strongly favour a building scheme for Dodworth. The outlook seems to be somewhat uncertain. Dodworth lives entirely by its collieries, and collieries are speculative. Fifteen years ago a quarter of the houses in Dodworth and surrounding villages were empty, and this may be so again in our time. With the uncertain outlook there is at present no building by private enterprise.

### **DRAINAGE AND SEWERAGE.**

Our Sewerage is efficient. No complaints of bad smells have been received by us since the erection of a number of ventilating shafts some few years ago.

There are 91 Water Closets, 52 Waste Water Closets, and 217 Middens. Many of the latter will no doubt be gradually replaced by Water Closets.

I may here give the present medical opinion on the influence of defective drainage and bad sanitation on the health of a community. The result is general ill-health, debility, anæmia, sore throat, diarrhœa, gastritis. These conditions of health predispose to almost all the ills that flesh is heir to, and increase their severity when contracted. Probably Small Pox, Scarlet Fever, Enteric (Typhoid) Fever, Diphtheria, never originate in defective sanitation. They must be contracted from a previous case. Erysipelas does seem frequently to arise

quite apart from a previous case, and is due to inoculation by a virulent germ of inflammation.

Scarlet Fever is breathed in or taken in milk. Diphtheria the same. Typhoid Fever is probably always taken into the stomach from a previous case, by polluted drinking water, polluted shell fish, polluted milk.

Perfect Sanitation would, I believe, result in the complete abolition of Typhoid Fever (a sewage borne disease), diminish the number of cases of most, if not all infectious diseases, lessen their severity, reduce the number of cases of Phthisis. I think the most important step towards perfect sanitation is the gradual abolition of the Privy Closets, unless it is the improvement of housing condition—light, ventilation, dryness, bedroom and house space. The number of our Water Closets is rising, whilst the number of privies is falling.

I am,

Yours faithfully,

**ARTHUR E. WHITE.**

